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|---|---|--|---|---|--|-------|
| <b>SCC eFile</b>  | <b>2014 ANNUAL REPORT<br/>COMMONWEALTH OF VIRGINIA<br/>STATE CORPORATION COMMISSION</b> | <b>214545135</b>                             |   |   |  |       |
| <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME:<br/><b>ManTech Test Systems, Inc.</b></p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:<br/><b>CT CORPORATION SYSTEM<br/>4701 COX ROAD, SUITE 285<br/>GLEN ALLEN, VA</b></p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE:<br/><b>HENRICO COUNTY</b></p> <p>4.) STATE OR COUNTRY OF INCORPORATION:<br/><b>VA</b></p> </div> <div style="width: 35%;"> <p>DUE DATE: <b>9/30/2014</b></p> <p>SCC ID NO: <b>04910923</b></p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMA</td> <td>1,000</td> </tr> </table> </div> </div> |   |  | CLASS   | AUTHORIZED                                  | COMA   | 1,000 |
| CLASS   | AUTHORIZED  |  |   |   |  |       |
| COMA  | 1,000   |  |   |   |  |       |
| <p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: 12015 LEE JACKSON HIGHWAY SUITE 128</p> <p style="text-align: center;">CITY/ST/ZIP: FAIRFAX, VA 22033-3300</p>   |   |  |   |   |  |       |
| <p>7.) DIRECTORS AND PRINCIPAL OFFICERS:      All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>   |   |  |   |   |  |       |
| <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: DANIEL J KEEFE<br/> TITLE: PRESIDENT<br/> ADDRESS: 12015 LEE JACKSON HIGHWAY<br/> CITY/ST/ZIP/CO: FAIRFAX, VA 22033 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> OFFICER </td> <td style="width: 40%; text-align: center; vertical-align: top;"> <input type="checkbox"/> DIRECTOR </td> </tr> </table>   |   |  | NAME: DANIEL J KEEFE<br>TITLE: PRESIDENT<br>ADDRESS: 12015 LEE JACKSON HIGHWAY<br>CITY/ST/ZIP/CO: FAIRFAX, VA 22033       | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR            |       |
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|  |                                     |                                     |         |                                     |          |
|--|-------------------------------------|-------------------------------------|---------|-------------------------------------|----------|
| NAME:  | MARGARITA MENTUS                    | <input checked="" type="checkbox"/> | OFFICER | <input type="checkbox"/>            | DIRECTOR |
| TITLE:   | VICE PRESIDENT                      |                                     |         |                                     |          |
| ADDRESS:   | 12015 LEE JACKSON HWY               |                                     |         |                                     |          |
| CITY/ST/ZIP/CO:  | FAIRFAX, VA 22033                   |                                     |         |                                     |          |
| NAME:  | PAUL J. ROVITTI                     | <input checked="" type="checkbox"/> | OFFICER | <input type="checkbox"/>            | DIRECTOR |
| TITLE:   | VICE PRESIDENT                      |                                     |         |                                     |          |
| ADDRESS:   | 12015 LEE JACKSON HWY               |                                     |         |                                     |          |
| CITY/ST/ZIP/CO:  | FAIRFAX, VA 22033                   |                                     |         |                                     |          |
| NAME:  | MICHAEL C. TILLISON                 | <input checked="" type="checkbox"/> | OFFICER | <input type="checkbox"/>            | DIRECTOR |
| TITLE:   | VICE PRESIDENT                      |                                     |         |                                     |          |
| ADDRESS:   | 12015 LEE JACKSON HWY               |                                     |         |                                     |          |
| CITY/ST/ZIP/CO:  | FAIRFAX, VA 22033                   |                                     |         |                                     |          |
| NAME:  | MICHAEL J. USTER                    | <input checked="" type="checkbox"/> | OFFICER | <input type="checkbox"/>            | DIRECTOR |
| TITLE:   | VICE PRESIDENT                      |                                     |         |                                     |          |
| ADDRESS:   | 12015 LEE JACKSON HWY               |                                     |         |                                     |          |
| CITY/ST/ZIP/CO:  | FAIRFAX, VA 22033                   |                                     |         |                                     |          |
| NAME:  | L. WILLIAM VARNER                   | <input checked="" type="checkbox"/> | OFFICER | <input type="checkbox"/>            | DIRECTOR |
| TITLE:   | VICE PRESIDENT                      |                                     |         |                                     |          |
| ADDRESS:   | 12015 LEE JACKSON HWY               |                                     |         |                                     |          |
| CITY/ST/ZIP/CO:  | FAIRFAX, VA 22033                   |                                     |         |                                     |          |
| NAME:  | HUI MARKVA                          | <input checked="" type="checkbox"/> | OFFICER | <input type="checkbox"/>            | DIRECTOR |
| TITLE:   | ASST TREASURER                      |                                     |         |                                     |          |
| ADDRESS:   | 12015 LEE JACKSON HWY               |                                     |         |                                     |          |
| CITY/ST/ZIP/CO:  | FAIRFAX, VA 22033                   |                                     |         |                                     |          |
| NAME:  | JEFFREY S. BROWN                    | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| TITLE:   | SECRETARY                           |                                     |         |                                     |          |
| ADDRESS:   | 12015 LEE JACKSON HWY               |                                     |         |                                     |          |
| CITY/ST/ZIP/CO:  | FAIRFAX, VA 22033                   |                                     |         |                                     |          |
| NAME:  | CHRISTINE A LANCASTER               | <input checked="" type="checkbox"/> | OFFICER | <input type="checkbox"/>            | DIRECTOR |
| TITLE:   | ASST SECRETARY                      |                                     |         |                                     |          |
| ADDRESS:   | 12015 LEE JACKSON HIGHWAY SUITE 128 |                                     |         |                                     |          |
| CITY/ST/ZIP/CO:  | FAIRFAX, VA 22033-3300              |                                     |         |                                     |          |
| NAME:  | GEORGE J PEDERSEN                   | <input type="checkbox"/>            | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| TITLE:   | DIRECTOR                            |                                     |         |                                     |          |
| ADDRESS:   | 12015 LEE JACKSON HIGHWAY           |                                     |         |                                     |          |
| CITY/ST/ZIP/CO:  | FAIRFAX, VA 22033-3300              |                                     |         |                                     |          |
| I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.  |                                     |                                     |         |                                     |          |
| /s/ JOHN P IRELAND   | JOHN P IRELAND, VICE                |                                     |         | 9/30/2014                           |          |
| SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT  | PRESIDENT                           |                                     |         | DATE                                |          |
|  | PRINTED NAME AND CORPORATE TITLE    |                                     |         |                                     |          |
| It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing. |                                     |                                     |         |                                     |          |